



Committee Nomination Form

*For Election to the Committee of Southern Business Women's Network
2018 to 2019*

NOMINATOR (please print)

I (Name): _____

Phone: _____

Address: _____

I am a full member of the Southern Business Women's Network

NOMINEE (please print)

I (Name): _____

Phone: _____

Address: _____

For the position of _____ of the Southern
Business Women's Network (SBWN).

I, _____ accept nomination for the above committee role.

I have not accepted any other nomination for election to the Board. I support the
objectives and purposes of SBWN.

I am:

1. at least 18 years of age,
2. a current member,
3. not an employee of or in receipt of fees from SBWN,
4. have not been convicted of an offence involving fraud or dishonesty, &
5. am not ineligible to be a Director under the Corporations Act 2001 (Cth) or the
Australian Charities Not-for profits Commission Act 2012 (Cth).

_____ Date: ____ / ____ / ____

Signature of Nominated Person

_____ Date: ____ / ____ / ____

Nominator's Signature